

## FACSIMILE TRANSMITTAL SHEET

TO:	Ms. Jeanette Chapman	FROM:	Victor J. Gallo
FAX NUMBER:	703-308-7768	DATE:	August 30, 2001
COMPANY:		TOTAL NO. OF PAGES INCLUDING COVER:	3
PHONE NUMBER:	702-630-5587	SENDER'S REFERENCE NUMBER:	AC-001
RE:	Supplemental Amendment	YOUR REFERENCE NUMBER:	S/N: 09/654,212

☒ URGENT    ☒ FOR REVIEW    ☐ PLEASE COMMENT    ☐ PLEASE REPLY    ☐ PLEASE RECYCLE

## NOTES/COMMENTS:

Ms. Chapman,

As per our telcon, please find attached a Transmittal Form and Supplemental Amendment that we discussed.

Best regards,

Vic Gallo

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

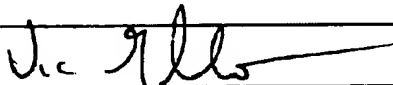
Approved for use through 10/31/2002. OMB 0651-0031


U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/654,212
	Filing Date	9/1/2000
	First Named Inventor	CABOT
	Group Art Unit	3711
	Examiner Name	CHAPMAN
Total Number of Pages in This Submission	Attorney Docket Number	AC-001

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: <u>SUPPLEMENTAL AMENDMENT</u> <u>By FACSIMILE ONLY</u>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	VICTOR GALLO
Signature	
Date	8/30/01

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: _____			
Typed or printed name	Victor Gallo		
Signature		Date	8/30/01

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**UNITED STATES PATENT AND TRADEMARK OFFICE**

**APPLICANT:** CABOT, Anthony N.  
**SERIAL NO.:** 09/654,212  
**FILED:** 9/1/2000  
**FOR:** Multiway Poker Game Method and Apparatus

**ART UNIT:** 3711**EXAMINER:** Chapman/Eshete

To: Commissioner of Patents and Trademarks  
Washington, DC 20231

Supplemental to the Amendment filed on May 24, 2001 kindly add the following to page 1.

**IN THE CLAIMS**

Kindly Cancel claims 8 through 20 as originally filed.

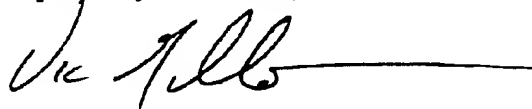
**REMARKS**

In regard to the Amendment filed on May 24, 2001, this Supplemental Amendment is submitted to make clear that claims 8 through 20 are cancelled consistent with page 5 of the Amendment as filed and the provisional election made during a telephone conversation with the Examiner on December 6, 2000. **This Supplemental Amendment is for a clarification for the record ONLY.**

If this for any reason does not meet your needs, please advise.

Dated: August 30, 2001  
By Facsimile Only

Respectfully Submitted,



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